CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Lawrence Martin	OFFICE USE ONLY					
Name	DECEMEN					
(2) PO Box 120336	RECEIVED					
Address (number and street)	DEC n 5 2017					
Fort Lauderdale, FL 33312	OFFICE FOUR OFFICE					
City, State, Zip Code	CITY CLERK'S OFFICE					
. Check here if address has changed	, (3) ID Number:					
4) Check appropriate box(es):						
Candidate Office Sought: Lauderhill City Commissioner, Seat 1						
☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
Party Executive Committee (PTY) Check here if PTY has disbanded						
☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed					
individual making electioneering communications)						
(5) Report Identifiers						
Cover Period: From $_{11}$ / $_{01}$ / $_{2019}$ To	11 / 30 / ₂₀₁₉ Report Type: M11					
	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
(b) Contributions This Report						
Cash & Checks \$,	Monetary Expenditures \$, , 39 . 38					
Phaselinas / Phaselinas / Phaselinas / Phaselinas						
Loans \$,	Transfers to					
	Office Account \$,,					
Total Monetary \$,,						
	Total Monetary \$, 39 · 38					
In-Kind \$,,						
	(8) Other Distributions					
	\$,,					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$, , 550 . 00	\$, , 382 . 36					
· · · · · · · · · · · · · · · · · · ·						
	tification					
	on to falsify a public record (ss. 839.13, F.S.)					
I certify that I have examined this report and it is true, correct, and complete:						
(Type name) Barbara Gayle	(Type name) Lawrence Martin					
☐ Individual (only for IE 🏋 Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Chairperson (only for PC and PTY)					
or electioneering comm.)						
X Barbara Gayle	X					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

1) Name Lawi	rence Martin		z) I.D. Number			
(3) Cover Period 11 / 01 / 2019 through 11 / 30 / 2019 (4) Page 2 of 2						
(5)	(7)	(8)	(9)	(10)	(11)	
Date	Full Name	Purpose				
(6)	(Last, Suffix, First, Middle)	(add office sought if	Expenditure			
Sequence	Street Address & City, State, Zip Code	contribution to a candidate)	Туре	Amendment	Amount	
Number	City, State, Zip Code	Carlaidate)				
11 /01 /2019	Bank of America 1601 E. Oakland Park Blvd		Bank service			
1	Oakland Park, FL 33334	Bank service charge	charge		\$17.00	
11 /19 /2019	3987 NW 19th Street					
2	Lauderdale Lakes, FL 33311	Campaign meeting	Lunch meeting		\$22.38	
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